FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1	(See insti	ructions)	Office use only	
NAME OF COMMITTEE (in f	ull) (Check if namis changed)	ne Example: If typying, type over the lines	12FE4M5	
COME BACK F	POLITICAL ACTION COMMIT	TEE		
			<u> </u>	
ADDRESS (number and s	treet) PO Box 40366			
X (Check if address is changed)	yashington			20016
				1-1-1-1
COMMITTEE'S E-MAI	L ADDRESS alcompliance.com	CITY	STATE▲	ZIP CODE ▲
COMMITTEE'S WEB I	PAGE ADDRESS (URL)			
N/A	, , , , , , , , , , , , , , , , , , ,			1
COMMITTEE'S FAX N	UMBER			
2. DATE 0 4	07 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y			
3. FEC IDENTIFICATION NUMBER C C00400457				
4. IS THIS STATEMENT X NEW (N) OR AMENDED (A)				
I certify that I have examin	ned this Statement and to the best of m	ny knowledge and belief it is true, correct a	nd complete	
Type or Print Name of ⁻	Freasurer Christopher	J. Ward		
Signature of Treasurer	Electronically Filed by Chris	topher J. Ward	Date 04 / D	0 1 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
NOTE: Submission of fals	•	on may subject the person signing this Sta	·	U.S.C. S437g.
Office Use Only		For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100	ssion FE	EC FORM 1 Revised 02/2003)